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8-25-47
PMA A-26

: UNITED STATES DEPARTMENT OF AGRICULTURE
: Production and Marketing Administration
: Washington 25, D. C.

: Number 144

July 19, 1948

: PMA PROCEDURE TRANSMITTAL

NOTICE

CHANGE OF ADDRESS: The Western Laboratory, Aerial Photographic and Engineering Service, Production and Marketing Administration, has moved to 167 West Second South, Salt Lake City 1, Utah. The address formerly was 145 Motor Avenue, Salt Lake City 1, Utah.

Reserve

NEW RELEASES

ADMINISTRATIVE
NOTICE NO. 99
7-12-48

REASSIGNMENT OF LIAISON AND COORDINATION FUNCTIONS IN CONNECTION WITH THE RESEARCH AND MARKETING ACT AND PERSONNEL DESIGNATION RELATING THERETO: Reassigns the program analysis and research liaison functions of the Marketing Research Branch to the Office of the Assistant Administrator for Marketing. Designates Mr. Earl R. Glover as Assistant to the Assistant Administrator for Marketing with responsibilities for providing staff assistance in developing and coordinating programs of responsibility assigned to PMA and the Research and Marketing Act of 1946. Distribution: A, B.

ADMINISTRATIVE
NOTICE NO. 100
7-14-48

REVISION OF "3 PERSONNEL" SERIES IN PMA PROCEDURE CLASSIFICATION CHART, AND RENUMBERING OF PERSONNEL INSTRUCTIONS: Revision of the "3 - PERSONNEL" series on the Classification Chart dated 10-24-45 for numbering PMA Manual Instructions, and Exhibit A, "Renumbering Schedule for Personnel Manual Instructions," are attached to this Administrative Notice. It is important that the existing Personnel Instructions be renumbered as required, since all new Instructions in this series will be numbered in accordance with the revised Personnel numbering series. Distribution: A, B.

REVISIONS AND CHANGES

101.2
EXHIBIT A-16
11-20-47

ADMINISTRATIVE AUTHORITIES - FOOD DISTRIBUTION PROGRAMS BRANCH: Under column headed "Approve Requests for Personnel Action" delete "grade CAF-7 or below" and the ditto marks, and replace with an "X". Under footnote 1/ delete the last part of the sentence that reads "and subject to any restrictions listed in the column." Distribution: A, B-05, 26, Field Only.

DISTRIBUTION: A, B

Page 1

PMA PROCEDURE TRANSMITTAL

REVISIONS AND CHANGES (Cont'd.)

126.1 and EXHIBIT A 7-9-48	DEVELOPMENT OF PRODUCTION GOALS AND PROGRAMS: This Instruction revised, setting forth the time schedule and Committee members for the 1949 production goals. Remove Instruction 126.1 dated 7-24-47 and Exhibit A dated 9-16-47, and insert attached. (Distributed separately to A and B Manual Holders.)
211.1 4-13-48	BASIC AUTHORITIES GOVERNING OFFICIAL TRAVEL: Page 5 revised to clarify the delegation of authority to approve extra-fare plane or train travel. Except where loss of life or property is involved extra cost of such travel must be approved by persons specifically designated or by the Director of Finance. Present designations are shown in PMA procedure 211.2. Remove page 6 dated 4-13-48, and insert revised page dated 7-8-48. Distribution: A, B.
324.1 6-29-48	RETIREMENT RESPONSIBILITIES AND PROCEDURES: Complete revision to make the Instruction conform with the new Retirement forms adopted by the Civil Service Commission and with the provisions of the new Retirement Law. Supersedes 324.1 dated November 6, 1946, which should be removed from the Manual. Forms Manual Insertions for the forms referred to in the Instruction are also attached. Distribution: A, B.
OBSOLETE FORMS SUPPLEMENT 2 5-26-48	On page 17, cross out the asterisk preceding FDA-761, "Request for Supplies." Stocks of this form may be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

FORMS MANUAL INSERTIONS

PMA-L-14 7-14-48 (Supersedes PMA-L-14, L-16, and L-17 dated 10-14-46)	RETIREMENT SYSTEM RIGHTS: Remove Forms Manual Insertions dated 9-30-46 for PMA-L-14, "Refund of Retirement Deductions," PMA-L-16, "Retirement-Information re. Future Annuity," and Form PMA-L-17, "Retirement-Information re. Immediate Annuity," and substitute the attached insertion for PMA-L-14, "Retirement System Rights." PMA-L-14, PMA-L-16, and PMA-L-17, dated 10-14-46, are obsolete. Procedure covering usc: 324.1, "Retirement Responsibilities and Procedures." Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Supplies of the revised PMA-L-14 will be available in the near future. Distribution: A, B.
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PMA PROCEDURE TRANSMITTAL

FORMS MANUAL INSERTIONS (Cont'd.)

PMA-L-15
7-14-48
(Supersedes
PMA-L-15
dated 10-10-46)

RETIREMENT APPLICATION FOR REFUND OR ANNUITY: Remove Forms Manual Insertion dated 9-30-46 for PMA-L-15, "Application for Refund," and substitute the attached insertion for PMA-L-15, "Retirement-Application for Refund or Annuity." Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." PMA-L-15, dated 10-10-46, is obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Supplies of the revised PMA-L-15 will be available in the near future. Distribution: A, B.

SF-100
7-9-48
(Supersedes
CSC Form 3000)

APPLICATION FOR DEATH BENEFITS: Forms Manual Insertion showing proper preparation of the form by applicant. Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." Remove insertion dated 9-20-46 for CSC Form 3000, "Retirement Death Claim," from the Forms Manual and substitute the attached insertion for SF-100. CSC Form 3000 is obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

SF-101
7-9-48
(Supersedes
CSC Forms
3001 and 3002)

APPLICATION FOR RETIREMENT: Put the attached Forms Manual Insertion for form SF-101, showing proper preparation of the form by applicant, in the Forms Manual. Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." Remove two insertions from the Manual, namely: One dated 9-23-46 for CSC Form 3001 and one dated 9-30-46 for CSC Form 3002. These two forms are obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

SF-102
7-9-48
(Supersedes
CSC Form 3005)

APPLICATION FOR REFUND OF RETIREMENT DEDUCTIONS: Forms Manual Insertion showing proper completion of the form by applicant. Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." Remove insertion dated 9-23-46 for CSC Form 3005 from the Forms Manual and substitute the attached insertion for SF-102. CSC Form 3005 is obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

PMA PROCEDURE TRANSMITTAL

FORMS MANUAL INSERTIONS (Cont'd.)

SF-103
7-9-48
(Supersedes
CSC Form 3012)

APPLICATION FOR SERVICE CREDIT: Forms Manual Insertion showing proper preparation of the form by applicant. Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." Remove insertion (3 pages) dated 9-23-46 for CSC Form 3012 from the Forms Manual and insert the attached SF-103. CSC Form 3012 is obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

SF-104
7-9-48
(Supersedes
CSC Form 3471)

ELECTION TO MAKE VOLUNTARY CONTRIBUTIONS: Forms Manual Insertion showing proper preparation of the form by applicant. Procedure covering use: 324.1, "Retirement Responsibilities and Procedures." Remove insertion dated 9-23-46 for CSC Form 3471 from the Forms Manual and substitute the attached insertion for SF-104. CSC Form 3471 is obsolete. Existing stocks should be disposed of in accordance with PMA Instruction 456.1. Distribution: A, B.

OBSOLETE

101.5
7-24-46

ADMINISTRATIVE AND PROGRAM RELATIONSHIPS, NEW YORK SUGAR, FIBERS, FATS AND OILS OFFICE: This office has been discontinued and its functions have been transferred to the CCC Field Office, New York, N. Y. Remove Instruction from Manual. Distribution: A, B.

328.1
and EXHIBIT A
8-5-46

FEDERAL EMPLOYEES PAY ACT OF 1946: Remove this Instruction, dated 8-5-46, including Exhibit A, from the Manual. A revision of the Instruction will be released in the near future. Distribution: A, B and All Employees.

* * *

MAKE YOUR IDEAS PAY !
WRITE THEM DOWN AND TURN THEM IN
AS EMPLOYEE SUGGESTIONS;
THEY MAY WIN CASH AWARDS !

U. S. DEPARTMENT OF AGRICULTURE
Production and Marketing Administration

ADMINISTRATIVE NOTICE NO. 99

REASSIGNMENT OF LIAISON AND COORDINATION FUNCTIONS IN CONNECTION WITH
THE RESEARCH AND MARKETING ACT AND PERSONNEL DESIGNATION RELATING THERETO

Effective immediately, the program analysis and research liaison functions of the Marketing Research Branch outlined in PMA Instruction 111.1 are reassigned to the Office of the Assistant Administrator for Marketing. Mr. Earl R. Glover is designated as Assistant to the Assistant Administrator for Marketing, with responsibility for providing staff assistance to the Assistant Administrator in developing and coordinating programs and responsibilities assigned to PMA under the Research and Marketing Act of 1946, in correlating such programs and responsibilities with other related marketing research and service programs and in maintaining liaison with the Office of the Administrator of the Research and Marketing Act.

* * *

UNITED STATES DEPARTMENT OF AGRICULTURE
Production and Marketing Administration

ADMINISTRATIVE NOTICE NO. 100

REVISION OF "3 PERSONNEL" SERIES IN PMA PROCEDURE CLASSIFICATION
CHART, AND RENUMBERING OF PERSONNEL INSTRUCTIONS

I COMPLETE REVISION OF PMA PROCEDURE CLASSIFICATION CHART

Complete revision is in process of the PMA Procedure Classification Chart which was distributed with PMA Manual Instruction 103.1, "Procedure System," dated 11-24-45. The revision of the "3 PERSONNEL" series for numbering Personnel instructions has already been approved and it is considered advisable to release it in advance of the overall revision. Revisions of other series may also be released prior to revision of the entire chart, if they are approved independently before the overall revision is completed. This will permit use of the series approved independently and avoid renumbering of any Instructions released in such series prior to issuance of the overall chart.

II REVISED CLASSIFICATION SERIES FOR PERSONNEL INSTRUCTIONS

The approved classification series for numbering PMA Manual Instructions pertaining to Personnel procedures, regulations, requirements, and authorities is attached. It should be trimmed and fastened over the section headed "3 PERSONNEL," on the PMA Procedure Classification Chart, dated 10-24-45, if available. Supplies of this chart are not available for distribution and should not be requested. In any event, the attached "PERSONNEL" section of this chart should be held until the overall procedure Classification Chart is revised.

III RENUMBERING PMA MANUAL INSTRUCTIONS IN PERSONNEL SERIES

There is also attached a "Renumbering Schedule for Personnel Manual Instructions", showing the present number of the Instructions as now filed in the Manual and the new number assigned to each under the new classification. The "Distribution" column will indicate to individual Manual holders whether they received the original instructions. Each Manual holder is responsible for renumbering each Instruction in his Manual in accordance with the number in the column headed, "New Number," and for re-filing the Instructions in his Manual in numerical order, based on the new numbers of the Instructions.

IV PROMPT ATTENTION

In referring to the renumbered Instructions in the future, only the newly assigned numbers will be used. To avoid confusion, it is therefore important that all affected Instructions be renumbered immediately and re-filed numerically by such numbers, as required above.

* * *

Attachment - Exhibit A

<u>Present Number</u>	<u>Title of Instruction and Date Released</u>	<u>Distribution</u>	<u>New Number</u>
301.1	EMPLOYMENT POLICY FOR VETERANS AND CAREER SERVICE EMPLOYEES (12-18-46)	A B	310.1
303.1	POLITICAL ACTIVITY (5-21-46)	A, B and All Employees	345.1
303.2	LEGAL ASSISTANCE AVAILABLE TO EMPLOYEES (5-28-46)	A, B and All Field Employees	352.1
303.3	EMPLOYEE INFORMATION (10-24-46)	All Employees	350.1
303.4	APPLICATION FOR PATENTS BY PMA EMPLOYEES (3-17-48)	A, B	300.1
304.1	PERSONNEL CEILINGS (3-11-47)	A, B-05, 26, Field Only	137.1
306.1	ISSUANCE AND ACCOUNTABILITY FOR IDENTIFICATION CARDS AND EXHIBIT A (1-22-48)	A, B	306.1
309.1	PERSONNEL STATISTICS REPORTS (7-8-46)	A	309.1
309.2	MONTHLY REPORT OF PERSONNEL (7-7-46)	A	309.2
309.3	VISITORS REPRESENTING FOREIGN GOVERNMENTS (8-2-46)	A, B	309.3
310.1	REQUEST FOR PERSONNEL ACTION (8-28-46)	A, B	305.1
310.2	EMPLOYMENT (3-13-46)	A, B	310.2
310.3	CONVERSION OF CERTAIN GROUPS OF EMPLOYEES TO CLASSIFIED STATUS (4-17-46)	A, B	320.1
310.4	CLASSIFIED STATUS FOR CERTAIN GROUPS OF EMPLOYEES (4-17-46)	A, B and All Employees	320.2
310.5	PLACEMENT POLICY FOR THE PROMOTION, REASSIGNMENT AND TRANSFER OF PERSONNEL WITHIN PMA (5-8-46)	A, B	320.3

RENUMBERING SCHEDULE FOR PERSONNEL MANUAL INSTRUCTIONS

<u>Present Number</u>	<u>Title of Instruction and Date Released</u>	<u>Distribution</u>	<u>New Number</u>
310.6	FILLING VACANCIES ADVERTISED IN BULLETINS - WASHINGTON (7-31-46)	A, B (Washington Only)	310.6
310.7	ELIGIBILITY FOR PROBATIONAL APPOINTMENT FOR CERTAIN VETERANS (8-3-46)	A, B and ALL Employees	302.1
310.8	INFORMATION FOR ALL PMA EMPLOYEES REGARDING CIVIL SERVICE EXAMINATIONS (11-5-46)	A, B and ALL Employees	300.2
310.9	CIVIL SERVICE CERTIFICATES RECEIVED DIRECT BY PMA FIELD OFFICES (8-22-46)	A, B	320.4
311.1	RECRUITMENT POLICY (2-15-46)	A, B	311.1
312.1	CONSULTANTS (7-24-46)	A, B-(Washington and B-05, 26, Field)	312.1
312.3	EMPLOYMENT UNDER LETTER OF AUTHORIZATION (7-7-47)	A, B.	313.1
313.1	PAY INCREASES AS REWARDS FOR SUPERIOR ACCOMPLISHMENT (4-4-46)	A, B	104.5
314.1	SALARY ADMINISTRATION IN CASES OF DEMOTION (12-10-45)	A, B	322.1
315.2	REDUCTION IN FORCE AND EXHIBITS A and B (3-8-46)	A, B	326.1
315.3	RESIGNATIONS (1-15-47)	A, B	323.1
315.4	SEPARATION OF EMPLOYEES ON MILITARY FURLOUGH	A, B	302.2
316.1	REEMPLOYMENT OF VETERANS (2-1-46)	A, B	302.3
316.2	PLACEMENT OF RETURNING VETERANS AND EXHIBIT A (4-4-46)	A, B	302.4
321.1	LEAVE REGULATIONS AND ROUTINES (3-6-47)	A, B	347.1
321.2	GRANTING OF MILITARY LEAVE (8-29-47)	A, B	302.5

RENUMBERING SCHEDULE FOR PERSONNEL MANUAL INSTRUCTIONS

<u>Present Number</u>	<u>Title of Instruction and Date Released</u>	<u>Distribution</u>	<u>New Number</u>
322.1	OVERTIME (2-25-47)	A, B	346.1
323.1	EFFICIENCY RATING PROGRAM - WASHINGTON AND FIELD and EXHIBIT A (1-26-48)	A, B	341.1
323.2	STANDARD ELEMENT MARKINGS OF EFFICIENCY RATINGS (2-26-47)	A, B	341.2
324.1	RETIREMENT RESPONSIBILITIES AND PROCEDURES (11-6-46)	A, B	324.1
325.1	DISCIPLINE (4-23-46)	A, B	344.1
325.2	DISCIPLINARY CASES INVOLVING FISCAL IRREGULARITIES (10-31-47)	A-06, 07, 09, 15, 26, 25, 31; B-06, 09, 15, 26 (Field Only)	344.2
326.1	HOURS OF WORK (5-9-46)	A, B	346.2
328.1	FEDERAL EMPLOYEES PAY ACT OF 1946 and EXHIBIT A (8-5-46)	A, B and All Employees	OBSOLETE - Destroy
328.2	ALLOWANCES PAYABLE TO PMA EMPLOYEES STATIONED IN FOREIGN COUNTRIES (8-7-46)	AA	307.1
328.3	ESTABLISHMENT OF WAGE RATES BY THE NATURAL COOLER STORAGE, ATCHISON, KANSAS, WAGE BOARD and EXHIBIT A (4-11-47)	A (Washington Only) Midwest Area Fiscal Office, Midwest Area Personnel Office; Natural Cooler Storage, Atchison, Kansas	335.1

RENUMBERING SCHEDULE FOR PERSONNEL MANUAL INSTRUCTIONS

<u>Present Number</u>	<u>Title of Instruction and Date Released</u>	<u>Distribution</u>	<u>New Number</u>
329.1	DETAILS OF PERSONNEL (8-21-46)	A, B	321.1
330.1	PERSONNEL TRAINING (3-19-46)	A, B	354.1
330.2	INTERN TRAINING IN WASHINGTON AND THE FIELD (7-7-47)	A, B	354.2
335.1	VETERAN TRAINING (5-23-46)	A, B	354.3
339.1	EMPLOYEE PROGRESS REPORTS (9-23-46)	A, B	354.4
350.1	SAFETY POLICY (9-10-46)	A, B, C	355.1
353.1	INVESTIGATION AND REPORTING ACCIDENTS AND INJURIES and EXHIBIT A (7-31-46)	A, B, C	353.1
363.1	EMPLOYEE GROUP ACTIVITIES (4-9-48)	A, B	356.1

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3 PERSONNEL

30 GENERAL

300 General
301 Authorities
302 Veterans, Military Service
303 Expert Examiners
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305 Recommendations and Actions
306 Identification Cards
307 Foreign Duty
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309 Records and Reports

31 EMPLOYMENT

310 General
311 Recruitment
312 Consultants
313 Letter of Authorization
314 Cooperative
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316 Schedules A and B
317
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319 Records and Reports

32 EMPLOYMENT CHANGES

320 General
321 Detail, Reassignment & Transfer
322 Changes in Grade
323 Resignation
324 Retirement
325 Disciplinary Removals
326 Reduction in Force
327 Pay Adjustments & Increases
328 Death
329 Records and Reports

33 CLASSIFICATION

330 General
331 Audits and Surveys
332 Allocations
333 Appeals
334 Specifications
335 Wage Boards
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339 Records and Reports

34 CONDITIONS OF EMPLOYMENT

340 General
341 Efficiency Ratings
342 Investigations and Loyalty
343 Physical Examinations
344 Discipline
345 Political Activity
346 Hours and Overtime
347 Leave
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349 Records and Reports

35 EMPLOYEE WELFARE

350 General
351 Grievances
352 Counseling
353 Injury Compensation
354 Training
355 Safety and Health
356 Employee Activities
357
358
359 Records and Reports

BASIC AUTHORITIES GOVERNING OFFICIAL TRAVEL

(IV A 1 f)

(4) Required in the interest of the Government.
LIMITATION: This authority is restricted. Travel by extra fare airplane or train in class four may be approved only by designated officials with specific delegation of authority or the Director of Finance.

g In emergency or unusual circumstances when the use of seat or parlor car is necessary for a journey of two hours or less.

h Station and field party expenses and transportation.

i Approval of Travel without prior authority where no emergency existed. LIMITATION: This authority is limited to the Deputy Administrator, Assistant Administrators, Directors of Branches, Directors of Staff Offices and PMA State Chairmen and may not be redelegated.

j Approval of travel accommodations costing more than a standard lower berth, when necessary for security purposes. LIMITATION: This authority is limited to the Deputy Administrator, Assistant Administrators, Directors of Branches, Directors of Staff Offices and PMA State Chairmen and may not be redelegated.

V AUTHORIZATIONS AND APPROVALS ABOVE BUREAU LEVEL

The Deputy Administrator and each Assistant Administrator, as appropriate, are authorized to act for the Administrator's Office in indorsing requests for travel authority and advance of funds required beyond the range of authority delegated to officers of PMA and in obtaining clearances and approvals of appropriate authority from Departmental or other officials.

A Foreign Travel - Authorizations for Foreign travel of PMA employees must be cleared with the Office of Foreign Agricultural Relations and the Office of Budget and Finance.

B Travel of Persons Not Employed by the Government - When travel is to be performed for the benefit of the Administration by persons who are not Government employees, travel and per diem expenses may be allowed them while away from their homes or regular places of business in accordance with Standardized Government Travel Regulations, but advance approval of the Director of Finance of travel authorizations for such travel must be obtained.

BASIC AUTHORITIES GOVERNING OFFICIAL TRAVEL

(V)

C Travel Advance Funds - Under the Subsistence Expense Act of 1926 and the Act of August 2, 1946, designated (bureau) officials are authorized to approve applications for advances in the amount of \$1,000 or less for (a) subsistence expenses incident to official travel or (b) expenses in connection with transfer of official station within the continental United States. Applications for advances for these purposes exceeding \$1,000 must be approved by the Director of Finance.

* * *

U. S. DEPARTMENT OF AGRICULTURE
PRODUCTION AND MARKETING ADMINISTRATION

RETIREMENT RESPONSIBILITIES AND PROCEDURES

I PURPOSE

To define responsibilities for retirement matters and to prescribe procedures for carrying out these responsibilities for Washington and the field.

II DEFINITION OF TERMS

A PE Division - The term "PE Division" as used in this Instruction means the personnel office which has delegated authority to process personnel actions affecting the employee concerned.

B AF Division - The term "AF Division" as used in this Instruction means the Fiscal office responsible for the payrolling of the employee concerned.

C Branch - The word "branch" as used in this Instruction means branch or staff office.

III RESPONSIBILITIES

A PE Division

1 Rendering an advisory service to employees including such matters as dates and length of service, eligibility for retirement, service credit, deposits and redeposits, voluntary contributions, rights of employees, and computation of approximate amounts of annuities.

2 Preparing a monthly report of retirements for the Office of Personnel in the manner prescribed by PMA Instruction 309.1, "Personnel Statistics Reports."

3 Processing documents and performing the functions prescribed in paragraph IV below.

B AF Division

1 Maintaining CSC Form 2806, "Retirement Record CSC-2806 Card."

2 Computing and making deductions from employees' salaries.

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RETIREMENT RESPONSIBILITIES AND PROCEDURES

(III B)

3 Preparing an annual summary of retirement fund transactions.

4 Answering inquiries regarding such matters as amounts of deductions in the fund, and the status of applications for refunds of retirement deductions and applications for service credit.

5 Photostating CSC-2806 upon separation or transfer of employees.

6 Preparing requests to the Civil Service Commission for set-offs from the total retirement amounts due for repayment to the Government for such items as advance payments for unearned annual or sick leave, overpayment of salary, unrepaid travel advances or other indebtedness.

7 Processing documents and performing the functions prescribed in paragraph IV below.

IV PROCEDURES

A Appointments

1 Employees Without Previous Federal Service

a The PE Division shall advise each employee of his right to execute and submit CSC Form 2806-1, CSC-2806-1 "Designation, Change or Revocation of Beneficiary," to the Civil Service Commission.

b The PE Division shall require each employee to complete Form PMA-239, "Retirement Record Data," PMA-239 and shall forward it to the AF Division.

c The AF Division shall prepare CSC-2806 from PMA-239.

2 Employees With Previous Federal Service

a The PE Division shall require each employee to complete PMA-239 and shall forward it to the AF Division.

b The AF Division shall prepare CSC-2806 from PMA-

RETIREMENT RESPONSIBILITIES AND PROCEDURES

(IV A 2 b)

239, or if the employee has transferred from within the Department, shall prepare and submit Form AD-196, AD-196 "Request for Retirement Record Card," to the bureau or office holding the card. Upon receipt of the CSC-2806, the AF Division shall post required information on it.

B Separations

1 The PE Division shall send Form PMA L-14, PMA L-14 "Retirement System Rights" to each separated employee, attached to his copy of Standard Form 50, "Notification of Personnel Action." SF-50

2 If the separated employee files a Standard SF-102 Form 102, "Application For Refund of Retirement Deductions," or a Standard Form 101, "Application for Retirement (Discontinued Service)," the administrative officer or SF-101 other official of the Branch, who receives the form, shall forward it immediately to the AF Division.

3 After the employee's payroll account has been cleared, or, if required, reconciled by CSC-3037 CSC-3037 "Request for Recovery of Debt Due the United States," the AF Division shall complete and forward CSC-2806 (together with CSC-3037 if used) to the Civil Service Commission. If the employee has by that time filed either SF-102 or SF-101 with PMA, such form shall be verified (SF-101 also to be completed) and forwarded to the Civil Service Commission with CSC-2806. The AF Division shall also inform the employee by means of Form PMA L-15, "Retirement - Application for Refund PMA L-15 or Annuity," of the date on which the application and Form 2806 were sent to the Commission.

C Optional Retirement

1 When an employee indicates his desire to retire optionally, the PE Division shall determine his eligibility by reviewing CSC-2806, and shall obtain verification of any unverified service by completing Form PMA L-18, PMA L-18 "Verification of Service," and forwarding it to the CSC.

2 If the employee is eligible to retire, the PE Division shall suggest that he complete SF-101 and forward it to his administrative officer.

RETIREMENT RESPONSIBILITIES AND PROCEDURES

(IV C)

3 The appropriate branch shall then prepare Form AD-517, "Request for Personnel Action," in the manner AD-517 prescribed by PMA Instruction 310.1, "Request for Personnel Action," and forward the original together with SF-101 to the PE Division.

4 The PE Division, after verifying SF-101, shall forward it to the AF Division.

5 After the employee's last day of duty, the appropriate branch shall forward the carbon copy of AD-517 to the AF Division, as prescribed in PMA 310.1.

6 The PE Division shall prepare SF-50, marked "Retirement (Optional)," from the AD-517 received from the Branch.

7 If the employee has completed 25 or more years of Federal service, the PE Division shall prepare a letter of appreciation for signature of the Secretary.

8 After the employee's payroll account has been cleared, the AF Division shall complete forms SF-101 and CSC-2806 and shall forward them to the Civil Service Commission.

D Mandatory Retirement

1 If an employee has unverified service which would be the deciding factor in determining eligibility for retirement, the PE Division shall complete and forward PMA L-18 to the CSC not less than six months before the prospective date of retirement.

2 After determining the employee's eligibility for retirement, the PE Division shall prepare and forward Standard Form 37 "Notice of Retirement," together with SF-101 to SF-37 the employee through official channels at least 60 days in advance of the date of retirement.

3 The branch, upon receipt of the completed SF-101, and stub of SF-37 from the employee, shall prepare AD-517 and forward the original together with the forms to the PE Division.

4 The PE Division, after verifying SF-101, shall forward it to the AF Division.

RETIREMENT RESPONSIBILITIES AND PROCEDURES

(IV D)

5 To complete the case, the Branch and the PE and AF Divisions shall follow the procedures set forth in paragraph IV C 5, 6, 7 and 8 except that on SF-50 the PE Division shall note, "Retirement (Age)."

E Disability Retirement

1 Preparation and Submission of Claim

a To apply for disability retirement, an employee shall complete Form SF-101 and forward it to his administrative officer together with a doctor's certificate of his disability and a statement from his superior officer of his inability to perform the functions of his position. (The branch may make application for the employee if he refuses to do it himself. Also, if he is mentally incompetent, his guardian, his relative, or some other interested person may make it in his behalf.)

b The branch shall forward these forms, and any supplementary information it may desire to add, to the PE Division. (If the application is made for the employee by the branch, SF-101 need be accompanied only by a statement of the employee's superior officer and a statement that the employee has declined to execute the application in his own behalf.)

c The PE Division shall complete the SF-101 and forward it, together with the certificate of physician, and the statement of superior officer, to the CSC. The PE Division shall list in the transmittal letter any unverified service the employee may have. A copy of this letter shall be sent to the AF Division.

2 Approved Claim

a Upon receipt of RET. Form 46-48 from RET.46-48 the CSC allowing the claim, the PE Division shall forward the original to the appropriate branch and the copy to the AF Division.

b On the basis of RET. 46-48, the branch shall prepare AD-517 and forward the original together with the RET. 46-48 to the PE Division.

RETIREMENT RESPONSIBILITIES AND PROCEDURES

(IV E 2)

c To complete the case, the Branch and the PE and AF Divisions shall follow the procedures set forth in paragraph IV C 5, 6, 7, and 8, except that on SF-50 the PE Division shall note, "Retirement (Disability)," and that under subparagraph 8 CSC-2806 only shall be forwarded to the CSC by the AF Division.

3. Disapproved Claim - Upon receipt of the CSC's letter disallowing the claim, the PE Division shall notify the appropriate branch and the AF Division by memorandum. (The employee is informed of the disallowance directly by the CSC.)

F Service Credit

1 When an employee wishes to redeposit refunds or to deposit funds for periods when deductions were not taken from his salary, the PE Division shall have him complete SF-103, SF-103 "Application for Service Credit," and request him to forward it to the AF Division.

2 The AF Division shall, after verifying the information on SF-103, complete, certify, and forward it together with a photostatic copy of CSC-2806 to the CSC. (The CSC advises the applicant direct of the amount due and the manner and place of making payment.)

G Voluntary Contributions - When an employee inquires regarding the making of voluntary contributions to the retirement fund, the PE Division shall inform him of the requirements to be met and furnish him Form SF-104, "Election to Make Voluntary Contributions." SF-104 The employee shall complete the form, and send it directly to the CSC.

H Death of Employee - When an employee dies, the Branch shall contact the employee's next of kin or emergency addressee and notify such person of the right to apply for death benefits under the Retirement Act. The PE Division will assist in informing the next of kin what benefits may be payable. Form SF-100, "Application SF-100 for Death Benefits" should be executed by the eligible survivor as soon as possible, even though the benefit may not start until some time in the future. He should send the SF-100 direct to the Civil Service Commission as soon as completed.

RETIREMENT RESPONSIBILITIES AND PROCEDURES

(IV)

I Death of Annuitant - If any official of PMA learns of the death of an annuitant, the PE Division should be notified. The PE Division will notify the CSC, which agency will initiate the filing of Form SF-100 and will inform the interested parties of their rights.

* * *

Form PMA-L-14
(7-14-48)

UNITED STATES DEPARTMENT OF AGRICULTURE
Production and Marketing Administration

Dear Sir or Madam:

Subject: Retirement System Rights

This memorandum is given to all employees of PMA who are separated from the service. It will be of interest to you only if you have had deductions taken from your salary for credit to the Civil Service Retirement fund. In that event, you may select the paragraph applicable to your case, and may determine your rights either to a refund of the deductions or to an annuity. For other information, including how to find the amount of annuity, refer to your "Certificate of Membership in the Retirement System."

1. With less than 5 years of civilian service, you may receive a refund of the amount deducted from your salary, plus interest at 4 percent to December 31, 1947, and 3 percent thereafter, compounded annually, to date of separation, except that no interest is paid if the refund period is 1 year or less.
2. With 5 or more but less than 20 years of civilian service you may receive:
 - (a) A discontinued-service annuity at age 62; or
 - (b) A refund of the amount deducted from your salary, plus interest at 4 percent to December 31, 1947, and 3 percent thereafter, compounded annually, to date of separation.

Ordinarily it is far better to leave the money in the fund and receive an annuity at age 62. The annuity will be much higher than your own contributions would purchase. The difference represents the portion of the annuity paid by the Federal government. Before deciding to withdraw your contributions, you should find out how much the annuity will be at age 62.

3. With 20 or more years of civilian service, you will receive a discontinued-service annuity at age 62. You may not receive a refund of the deductions taken from your salary. If you have been separated by reduction-in-force and have had at least 25 years of service, you are eligible for a reduced annuity at once.

If you are eligible for a refund and wish to apply for it, request an "Application for Refund of Retirement Deductions" through your supervisor or administrative officer. If you are eligible for an immediate annuity request an "Application for Retirement."

Sincerely yours,

Chief, Personnel Division

FORM NUMBER: Form PMA-L-14
TITLE: RETIREMENT SYSTEM RIGHTS

ACTUAL SIZE: 8" X 10½"
PRINTED: 1 sheet, front only.

PREPARATION: Original by appropriate Personnel Division.

DISTRIBUTION: To employee through official channels.

PROCEDURE COVERING USE: 324.1

DISTRIBUTION: A, B
(7-14-48)

Form PMA-L-15
(7-14-48)

UNITED STATES DEPARTMENT OF AGRICULTURE
Production and Marketing Administration

Dear Sir or Madam:

Subject: Retirement - Application for Refund or Annuity

The following application, which you submitted to this Agency, was forwarded to the Civil Service Commission on the date indicated:

- ☐ Form SF 102, Application for Refund of Retirement Deductions, forwarded on _____.
- ☐ Form SF 101, Application for Retirement, forwarded on _____.

Your retirement record card, CSC Form 2806, was sent to the Commission on _____.

Any further inquiry concerning your application should be addressed to the Retirement Division, United States Civil Service Commission, Washington 25, D. C.

Sincerely yours,

FORM NUMBER: Form PMA-L-15
TITLE: RETIREMENT - APPLICATION FOR REFUND
OR ANNUITY

ACTUAL SIZE: 8" X 10½"
PRINTED: 1 sheet, front only.

PREPARATION: Original by appropriate fiscal office.

DISTRIBUTION: To former employee.

PROCEDURE COVERING USE: 324.1

DISTRIBUTION: A, B
(7-14-48)

STANDARD FORM 100 (UNDER PUBLIC LAW 426) U. S. CIVIL SERVICE COMMISSION MARCH 1948		APPLICATION FOR DEATH BENEFITS CIVIL SERVICE RETIREMENT SYSTEM		CSF	
IMPORTANT.—To secure all possible benefits and to avoid delay in processing the claim—1. Read carefully the information on the reverse of this sheet; 2. Complete application in full; 3. If answer is "No" or "None," so state; 4. Typewrite or print in ink.					
A. PERSONAL INFORMATION CONCERNING THE DECEASED					
1. FULL NAME OF THE DECEASED <small>(Last) (First) (Middle)</small> MR. XXXX Jones James Edward			2. DATE OF BIRTH <small>Month Day Year</small> Nov. 3, 1918		
3. DATE OF DEATH <small>Month Day Year</small> April 16, 1948		4. PLACE OF DEATH (City and State) Washington, D. C.		5. DOMICILE (Legal residence at time of death—City and State) Alexandria, Virginia	
6. HOW MANY TIMES WAS DECEASED MARRIED? 2					
7. GIVE NAME OF EACH SPOUSE (Include all former marriages)		8. HOW WAS MARRIAGE TERMINATED? (Check one in each case)		9. DATE MARRIAGE WAS TERMINATED	
Mary K. Jones		<input checked="" type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE		April 16, 1948	
Elizabeth L. Jones		<input type="checkbox"/> DEATH <input checked="" type="checkbox"/> DIVORCE		June 30, 1942	
		<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE			
B. INFORMATION CONCERNING CIVILIAN AND MILITARY SERVICE OF THE DECEASED					
1. DEPARTMENT OR AGENCY IN WHICH LAST EMPLOYED, INCLUDING BUREAU OR DIVISION U.S. Dept. of Agriculture Production & Mktg. Admin.		2. LOCATION OF LAST EMPLOYMENT (City and State) Washington, D. C.		3. DATE OF FINAL SEPARATION <small>Month Day Year</small> April 16, 1948	
4. WAS DECEASED RETIRED AND RECEIVING CIVIL SERVICE ANNUITY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		5. IF DECEASED WAS RETIRED GIVE RETIREMENT CLAIM NUMBER None		6. DID DECEASED EVER SERVE IN THE ARMY, NAVY, MARINE CORPS, OR COAST GUARD OF THE UNITED STATES? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. INFORMATION CONCERNING THE APPLICANT					
1. YOUR NAME <small>(Last) (Given) (Middle)</small> XXXX MRS. Jones Mary Katherine		2. YOUR RELATIONSHIP TO THE DECEASED Widow		3. YOUR DATE OF BIRTH <small>Month Day Year</small> Oct. 5, 1918	
Fill in blanks 4 through 11 if you are the widow or widower of the deceased					
4. DATE OF MARRIAGE <small>Month Day Year</small> June 12, 1943		5. PLACE OF MARRIAGE (City and State) Washington, D. C.		6. MARRIAGE WAS PERFORMED BY <input checked="" type="checkbox"/> MINISTER OR JUSTICE OF PEACE <input type="checkbox"/> OTHER (Specify)	
7. WERE YOU LIVING WITH DECEASED AT TIME OF DEATH? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		8. IF NOT LIVING WITH DECEASED AT DEATH, WAS THERE A DIVORCE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
9. IF YOU WERE DIVORCED FROM DECEASED, GIVE DATE AND PLACE OF DIVORCE <small>MONTH DAY YEAR CITY STATE</small> None		10. IF SEPARATED BUT NOT DIVORCED, GIVE DATE AND CAUSE OF SEPARATION, AND STATE WHICH ONE LEFT THE OTHER Jan. 3, 1948. He left me after we quarrelled about raising the children.			
11. HOW MANY TIMES WERE YOU MARRIED? One					
12. GIVE NAME OF EACH SPOUSE (Include all former marriages)		13. HOW WAS MARRIAGE TERMINATED? (Check one in each case)		14. DATE MARRIAGE WAS TERMINATED	
James E. Jones		<input checked="" type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE		April 16, 1948	
		<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE			
		<input type="checkbox"/> DEATH <input type="checkbox"/> DIVORCE			
D. INFORMATION CONCERNING THE ESTATE OF THE DECEASED					
1. IF AN EXECUTOR OR ADMINISTRATOR HAS BEEN APPOINTED BY THE COURT TO SETTLE THE ESTATE OF THE DECEASED, GIVE NAME AND ADDRESS NAME: None ADDRESS:				2. IF AN EXECUTOR OR ADMINISTRATOR HAS NOT BEEN APPOINTED, WILL ONE BE APPOINTED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

(CONTINUE ON OTHER SIDE)

FORM NUMBER: SF-100

TITLE: APPLICATION FOR DEATH BENEFITS

ACTUAL SIZE: 8" X 10½"

PRINTED: 1 sheet, both sides.

PREPARATION: By eligible survivor in original only.

DISTRIBUTION: Applicant forwards direct to Civil Service Commission.

PROCEDURE COVERING USE: 324.1

DISTRIBUTION: A, R

7-9-48

E. INFORMATION CONCERNING CHILDREN OF THE DECEASED

1. WAS THE DECEASED SURVIVED BY ANY CHILDREN? ☒ YES ☐ NO

2. (A) List all surviving unmarried children of the deceased who are under 18 years of age at the time of death of deceased, or who are 18 years of age or over and incapable of self support because of mental or physical disability. (Indicate after the name of each child who is not the issue of the last marriage, the relationship of the child to the deceased; such as stepchild, adopted child, natural child, or other.)

FULL NAME OF CHILD	DATE OF BIRTH (Month, day, year)	NAME AND ADDRESS OF PERSON WHO HAS CARE AND CUSTODY OF THE CHILD AND THE RELATIONSHIP TO THE CHILD
Ann Louise Jones	April 2, 1945	Mary K. Jones - Mother 1212 K St., N.W., Wash. 6, D. C.
Ella Eve Jones	October 3, 1946	Mary K. Jones - Mother
Elizabeth Jones - by Marriage former	June 7, 1940	Elizabeth L. Jones - Mother Address Unknown

2. (B) IS THERE AN UNBORN CHILD OF THE DECEASED? ☒ YES ☐ NO

3. IF A GUARDIAN HAS BEEN APPOINTED BY THE COURT FOR ANY OF THE CHILDREN ABOVE, GIVE NAME AND ADDRESS

NAME

ADDRESS

None

4. IF A GUARDIAN HAS NOT BEEN APPOINTED WILL ONE BE APPOINTED?

☐ YES☒ NO

F. INFORMATION CONCERNING OTHER RELATIVES OF THE DECEASED

1. List below all children of the deceased not named in Item E2, or the descendants of a deceased child or children.
 2. If there are no children or descendants, list below the widow or widower, parents, brothers and sisters, and descendants of deceased brothers and sisters. (Indicate whether the brothers and sisters are of whole or half blood when both degrees of kinship are involved.)
 3. If there are no survivors within the degrees indicated in 1 and 2, list below the heirs who can inherit from the deceased.

NAME	AGE	RELATIONSHIP TO DECEASED	ADDRESS
None			

WARNING.—Any false statement in this application or misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than 10 years, or both. (52 Stat. 197; U. S. C. 18:80.)

NOTICE

Forward application to the Retirement Division, United States Civil Service Commission, Washington 25, D. C.

I hereby certify that all statements made in this application are true to the best of my knowledge, information, and belief, and that no evidence necessary to a settlement of this claim is suppressed or withheld.

Mary K. Jones
(SIGNATURE OF APPLICANT)

4376 K Street, N. W.

(NUMBER AND STREET)

April 27, 1948

(DATE)

Washington 6, D. C.

(CITY, ZONE NO., AND STATE)

INFORMATION FOR THE APPLICANT

COMPLETION OF APPLICATION

In order to determine all possible benefits, it is important that all questions on this application be answered. Omissions or incomplete answers may delay settlement of claim or result in failure to receive full benefits. If the answer to any question is "No" or "None", so state.

IF ASSISTANCE IS NEEDED

If you need assistance in completing this application, contact the personnel office of the department or agency in which the deceased was employed, the nearest regional office of the United States Civil Service Commission, or the Retirement Division, United States Civil Service Commission, Washington 25, D. C.

EVIDENCE REQUIRED

There must be submitted with this application a certified copy of the public record showing the death of the employee

or annuitant. This record may be obtained from the Bureau of Vital Statistics located in the State capital, except in New York City where the record is maintained in the respective Borough Departments of Health, and in the State of Maryland where the records are kept in the city of Baltimore. Failure to submit death certificate will delay settlement of claim.

You will be advised if it becomes necessary to submit additional evidence.

FINAL DETERMINATIONS

Upon receipt of this application, the United States Civil Service Commission will determine what benefits, if any, are payable, the amount of such benefits, and to whom they are payable. The Commission will inform the applicant of the final determination.

STANDARD FORM 101 (UNDER PUBLIC LAW 426) U. S. CIVIL SERVICE COMMISSION MARCH 1948		APPLICATION FOR RETIREMENT CIVIL SERVICE RETIREMENT SYSTEM <i>To avoid delay in processing claim—1. Read instructions carefully; 2. Complete application in full; 3. Typewrite or print in ink.</i>		CSA	
1. NAME MR. (Last) (First) (Middle) Do John Ralph			2. OTHER NAMES UNDER WHICH FORMERLY EMPLOYED None		
3. DATE OF BIRTH Month Day Year April 15 1878		4. DATE OF FINAL SEPARATION Month Day Year April 30 1948		5. APPROXIMATE NUMBER OF YEARS OF CIVILIAN SERVICE 37	
6. DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU OR DIVISION U.S. Dept. of Agriculture Production & Mktg. Admin.		7. LOCATION OF LAST EMPLOYMENT (City and State) Burlington, Iowa		8. TITLE OF LAST POSITION Foreman	
9. IF MARRIED, GIVE NAME AND DATE OF BIRTH OF WIFE OR HUSBAND NAME OF WIFE OR HUSBAND Mary L. Doe DATE OF BIRTH Month Day Year August 19, 1880		10. GIVE NAME AND DATE OF BIRTH OF EACH UNMARRIED CHILD UNDER AGE 18 NAME OF CHILD DATE OF BIRTH (Month, day, year) Elizabeth Anne Doe July 4, 1931			
Only applicants for disability retirement will complete item 11					
11. (A) WHEN DID YOU BECOME TOTALLY DISABLED? (Month and year) (B) DESCRIBE YOUR DISABILITIES, WHEN AND HOW INCURRED, AND HOW THEY INTERFERE WITH PERFORMANCE OF THE DUTIES OF YOUR POSITION					
12. (A) IF YOU HAVE RENDERED ACTIVE SERVICE IN THE ARMY, NAVY, MARINE CORPS, OR COAST GUARD OF THE UNITED STATES, AND YOUR SERVICE WAS TERMINATED UNDER HONORABLE CONDITIONS, COMPLETE THE FOLLOWING SCHEDULE FROM YOUR DISCHARGE					
BRANCH OF SERVICE	SERIAL NO.	DATE OF ENTRANCE ON ACTIVE DUTY	DATE OF SEPARATION FROM ACTIVE DUTY	LAST GRADE OR RANK	ORGANIZATION AT DISCHARGE (Div., Regiment, Co., etc.)
Army	30491145	April 1, 1916	May 26, 1919	Sergeant	Co. B, 78th Reg.
(B) ARE YOU IN RECEIPT OF OR HAVE YOU APPLIED FOR MILITARY RETIRED PAY? (Retired pay does not include pension or compensation) <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO					
13. (A) HAVE YOU EVER RECEIVED OR MADE APPLICATION FOR COMPENSATION UNDER THE UNITED STATES EMPLOYEES' COMPENSATION ACT OF SEPTEMBER 7, 1916? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (B) IF YOUR ANSWER IS YES, STATE THE NUMBER OF YOUR CLAIM AND THE PERIOD FOR WHICH YOU RECEIVED COMPENSATION CLAIM NO. 1111111 FROM Month Day Year TO Month Day Year March 17, 1942 May 15, 1943			14. (A) IF YOU PREVIOUSLY FILED ANY APPLICATION UNDER THE CIVIL SERVICE RETIREMENT ACT, INDICATE TYPE OF CLAIM. <input type="checkbox"/> RETIREMENT ANNUITY <input checked="" type="checkbox"/> REFUND <input checked="" type="checkbox"/> SERVICE CREDIT <input type="checkbox"/> VOLUNTARY CONTRIBUTIONS (B) FURNISH CLAIM NUMBER IF KNOWN CSR- 3000000 GSD- 58235		

(CONTINUED ON NEXT PAGE)

10-54512-1

FORM NUMBER: SF-101

TITLE: APPLICATION FOR RETIREMENT

ACTUAL SIZE: 8" X 10½"

PRINTED: 2 sheets, four sides. (Only pages 1 and 2 are duplicated here. Pages 3 and 4 contain information for employees and are detached before the form is submitted.)

PREPARATION: By applicant in original only.

DISTRIBUTION: To appropriate PE Division through administrative channels, unless applicant has been separated more than 30 days. In such cases applicant sends form direct to Civil Service Commission.

PROCEDURE COVERING USE: 324.1

 DISTRIBUTION: A, B
 7-9-48

15. INDICATE BY "X" IN THE APPROPRIATE BOX BELOW THE TYPE OF ANNUITY YOU ELECT TO RECEIVE. NO CHANGE WILL BE PERMITTED AFTER YOUR ANNUITY IS GRANTED. READ CAREFULLY "TYPES OF ANNUITY" ON ATTACHED SHEET.

A

LIFE ANNUITY

This type of annuity is available to all retiring employees.

B

X

REDUCED ANNUITY WITH BENEFIT TO WIDOW

This type of annuity is available only to married male employees who have completed 15 years of service and who are eligible for annuity at time of separation, or who are retiring on account of total disability.

IF YOU CHOOSE THIS TYPE OF ANNUITY, FURNISH THE FOLLOWING INFORMATION:

WIFE'S NAME (First) (Middle) (Maiden)

Mary Lois Roe

WIFE'S DATE OF BIRTH DATE AND PLACE OF MARRIAGE
Month Day Year

Aug. 19, 1880 Sept. 21, 1901
Washington, D. C.

C

REDUCED ANNUITY WITH BENEFIT TO PERSON NAMED

This type of annuity is available only to unmarried employees retiring in good health who have completed 15 years of service and are eligible for annuity at time of separation. The person named must have an insurable interest in the retiring employee.

IF YOU CHOOSE THIS TYPE OF ANNUITY, FURNISH THE FOLLOWING INFORMATION:

NAME OF PERSON TO RECEIVE BENEFIT (First, middle, last)

RELATIONSHIP

DATE OF BIRTH
Month Day Year

WARNING.—Any false statement in this application or misrepresentation relative thereto is a violation of the law punishable by a fine of not more than \$10,000 or imprisonment of not more than ten years, or both (52 Stat. 197; U. S. C. 18:80).

I hereby certify that all statements made in this application are true to the best of my knowledge and belief.


(SIGNATURE OF APPLICANT)

20 West Beach Avenue

(NUMBER AND STREET)

Tampa 3,

(CITY AND ZONE NUMBER)

Apr. 23, 1948

(DATE)

Florida

(STATE)

NOTICE

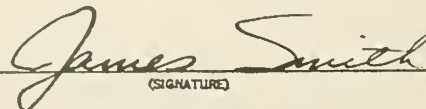
1. If not separated, or if separated less than 30 days, submit your application to the agency or department in which employed.
2. If you have been separated more than 30 days, forward this application direct to the Retirement Division, U. S. Civil Service Commission, Washington 25, D. C.

FOR USE OF THE EMPLOYING DEPARTMENT OR AGENCY

(See Chapter R5 of the Federal Personnel Manual for instructions)

PLACE "X" IN APPROPRIATE BOX BELOW:

- ☐ THE APPLICANT NAMED ABOVE IS NOW SERVING IN A POSITION SUBJECT TO THE RETIREMENT ACT.
- ☒ INDIVIDUAL RETIREMENT RECORD (FORM 2806) AND REGISTER OF SEPARATIONS AND TRANSFERS (CSC FORM 2807) IS ATTACHED HERETO.
- ☐ INDIVIDUAL RETIREMENT RECORD (FORM 2806) WAS SENT TO U. S. CIVIL SERVICE COMMISSION ON _____ WITH REGISTER OF SEPARATIONS AND TRANSFERS (CSC FORM 2807) NO. _____ (DATE)


(SIGNATURE)

Fiscal Accountant

(OFFICIAL TITLE)

May 4, 1948

(DATE)

Production & Marketing Admin., USDA

(DEPARTMENT OR AGENCY)

[illegible]

FORM NUMBER: SF-102

TITLE: APPLICATION FOR REFUND OF
RETIREMENT DEDUCTIONS

ACTUAL SIZE: 8" X 10½"

PRINTED: 1 sheet, both sides. (Reverse is for use of Civil Service Commission and is not duplicated here.)

PREPARATION: By applicant in original only.

DISTRIBUTION: Applicant forwards direct to appropriate fiscal office.

PROCEDURE COVERING USE: 324.1

DISTRIBUTION: A, B
7-9-48

STANDARD FORM 103 APPLICATION FOR SERVICE CREDIT U.S. CIVIL SERVICE COMMISSION MARCH 1948				APPLICATION FOR SERVICE CREDIT CIVIL SERVICE RETIREMENT SYSTEM				CSD	
1. NAME (Last) Doe, (First) John (Middle) Ralph				2. OTHER NAMES UNDER WHICH FORMERLY EMPLOYED		3. DATE OF BIRTH Month Day Year October 1 1880			
4. (A) DEPARTMENT OR AGENCY IN WHICH PRESENTLY OR LAST EMPLOYED, INCLUDING BUREAU, BRANCH, OR DIVISION U.S. Dept. of Agriculture, Production and Marketing Administration				4. (B) LOCATION OF EMPLOYMENT (City and State) Washington, D. C.		4. (C) TITLE OF POSITION Clerk			
5. In order to obtain full credit for service under the Civil Service Retirement Act, I desire to pay for service during which deductions were not currently withheld for service prior to August 1, 1920, or service in the Army, Navy, Marine Corps, or Coast Guard of the United States. Such service is credited without deposit. (2) Supply full data for each period of service claimed. If possible, obtain data from personnel reports in your possession. (3) Attach supplemental sheet if necessary.)									
DEPARTMENT OR AGENCY, INCLUDING BUREAU, BRANCH, OR DIVISION WHERE EMPLOYED		LOCATION OF EMPLOYMENT (CITY AND STATE)		TITLE OF POSITION		PERIODS OF SERVICE BEGINNING DATE ENDING DATE		INDICATE WHETHER DEDUCTIONS WERE NOT WITHHELD OR SERVICE CREDITED (Check one)	
Dept. Agri., Bu. Plant Industry		Washington, D. C.		Clerk		June 1, 1928 March 15, 1939		NOT WITHHELD <input checked="" type="checkbox"/> CREDITED <input type="checkbox"/>	
Treasury Dept., Bu. Internal Rev.		Washington, D. C.		Clerk		May 2, 1930 May 17, 1932		NOT WITHHELD <input type="checkbox"/> CREDITED <input checked="" type="checkbox"/>	
6. (A) ARE DEDUCTIONS FOR CIVIL SERVICE RETIREMENT NOW BEING TAKEN FROM YOUR SALARY? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				7. INDICATE METHOD YOU WISH TO USE IN MAKING PAYMENT. <input type="checkbox"/> LUMP SUM <input checked="" type="checkbox"/> INSTALLMENT PAYMENTS					
(B) IF YOUR ANSWER IS NO, FURNISH THE DATE OF SEPARATION FROM THE LAST POSITION UNDER THE CIVIL SERVICE RETIREMENT ACT.				I hereby certify that all statements in this application are true to the best of my knowledge and belief.					
NOTICE 1. If employed, forward this application to your agency or department. 2. If separated, forward this application to the Retirement Division, United States Civil Service Commission, Washington 25, D. C.				Signature of Applicant: <i>John R. Doe</i> (SIGNATURE OF APPLICANT) 1312 K St., N. W. (NUMBER AND STREET) Washington 8 (CITY AND ZONE NUMBER) May 8, 1948 (DATE) D. C. (STATE)					

16-54418-1

FORM NUMBER: SF-103
TITLE: APPLICATION FOR SERVICE CREDIT

ACTUAL SIZE: 8" X 10½"
PRINTED: 1 sheet, both sides.

PREPARATION: Original only. Applicant completes page 1. Appropriate fiscal office completes page 2.

DISTRIBUTION: Applicant forwards direct to appropriate fiscal office.

PROCEDURE COVERING USE: 324.1

DISTRIBUTION: A, B

7-9-48

GENERAL INFORMATION

SERVICE FOR WHICH PAYMENT IS OPTIONAL FOR FULL RETIREMENT CREDIT

(A) In order for the employee to receive full retirement credit for civilian service since August 1, 1920, if deductions were not withheld from earnings, it will be necessary that retirement deductions, plus interest, be paid to the retirement fund.

(B) The amount due for civilian service during which deductions were not withheld from earnings will be computed at the rate of 2 1/2 percent of salary earned for service rendered from August 1, 1920, to June 30, 1926; 3 1/2 percent from July 1, 1926, to June 30, 1942; 5 percent from July 1, 1942, to end of the pay period prior to the first pay period which begins after June 30, 1948; and 6 percent thereafter, plus interest at the rate of 4 percent compounded annually to December 31, 1947, and 3 percent compounded annually thereafter during all periods of creditable service.

(C) If the payment is not made to the retirement fund, credit is allowed for the service but the annuity otherwise payable will be reduced by 10 percent of the amount of retirement deductions with interest due at retirement.

SERVICE FOR WHICH PAYMENT IS REQUIRED FOR FULL RETIREMENT CREDIT

(A) Before credit may be allowed for any period or periods of employment for which a refund of retirement deductions has previously been paid, it will be necessary that the employee make a repayment to the retirement fund.

(B) The amount due for repayment of any sum previously refunded will be the amount paid to the employee plus interest during subsequent employment at the rate of 4 percent compounded annually to December 31, 1947, and 3 percent compounded annually thereafter.

METHOD OF MAKING PAYMENT

Payment may be made by the employee either in a lump sum or installment payment. Where the installment method is selected by the employee, a deposit book will be furnished for the purpose of identifying each remittance forwarded to the United States Civil Service Commission.

The amount of installment payments shall not be less than \$10 each month. Do not send any remittance with the application. When the application for service credit is approved, instructions will be issued by the United States Civil Service Commission as to the amount to be deposited and the procedure to be followed.

FOR USE OF THE EMPLOYING DEPARTMENT OR AGENCY

(See chapter R3 of the Federal Personnel Manual for instructions)

IMPORTANT: The employing department or agency will complete the schedules below (attach supplemental sheet if necessary) or, if more convenient to the agency, attach a photo copy of the official retirement record card or cards (Form 2806).

SCHEDULE 1

The applicant for service credit named herein is presently employed in a position under the Civil Service Retirement Act, and according to official records, retirement deductions made from salary during the periods shown in the following schedule remain to employee's credit in the retirement fund:

DEPARTMENT OR AGENCY INCLUDING BUREAU, BRANCH, OR DIVISION WHERE EMPLOYED	LOCATION OF EMPLOYMENT (CITY AND STATE)	PERIODS OF SERVICE	
		BEGINNING DATE	ENDING DATE
U.S. Dept. of Agriculture, Prod. & Mktg. Admin.	Washington, D. C.	Sept. 1, 1945	Still employed

SCHEDULE 2

According to official records of this agency, the following is a schedule of verified civilian service for the United States or the Government of the District of Columbia showing complete periods of employment by the applicant since August 1, 1920, for which retirement deductions were not withheld from basic salary earned.

SERVICE HISTORY					FISCAL DATA (IF AVAILABLE)		
NATURE OF ACTION	POSITION	RATE OF PAY (PER ANNUM, PER DIEM, PER HOUR, ETC.)	EFFECTIVE DATE	DEPARTMENT OR AGENCY, INCLUDING BUREAU, BRANCH, OR DIVISION WHERE EMPLOYED	PERIODS OF SERVICE		AGGREGATE BASIC PAY
					BEGINNING DATE	ENDING DATE	
Temp Appt	Clerk	\$1800 p.a.	June 1, 1928	Dept. Agr'l. Bu. Plant Ind.	June 1, 1928	Mar. 15, 1929	\$1350.00

The statements and schedules above are based on the official records of this office and are correct to the best of my knowledge and belief.

James Smith
(Signature)
Retirement Clerk

(OFFICIAL TITLE)

Production & Marketing Administration, USDA

(DEPARTMENT OR AGENCY)

May 10, 1948
(DATE)

STANDARD FORM 104 (UNDER PUBLIC LAW 426) U. S. CIVIL SERVICE COMMISSION MARCH 1948				ELECTION TO MAKE VOLUNTARY CONTRIBUTIONS CIVIL SERVICE RETIREMENT SYSTEM (Type or print in ink)		CSV
1. NAME XXXX XXXX MISS	(Last)	(First)	(Middle)	2. OTHER NAMES UNDER WHICH EMPLOYED	3. DATE OF BIRTH Month Day Year	
	Collins,	Shirley	Hester	Smith	March 4 1921	
4. HOME ADDRESS	1302 K Street, N. W. Washington 6, D. C.			5. TITLE OF PRESENT POSITION Clerk - Stenographer		
6. DEPARTMENT OR AGENCY IN WHICH PRESENTLY EMPLOYED, INCLUDING BUREAU, BRANCH, OR DIVISION	U.S. Dept. of Agriculture Production & Mktg. Admin.			7. LOCATION OF EMPLOYMENT (City and State) Washington, D. C.		
<p>I hereby elect to make voluntary contributions to the Civil Service Retirement and Disability Fund for the purpose of purchasing additional annuity at retirement.</p> <p>April 15, 1948 (DATE)</p> <p>Shirley H. Collins (SIGNATURE)</p>						
<p>GENERAL INFORMATION AND INSTRUCTIONS</p> <p>1. Sign your name as it appears on the rolls of the office where employed.</p> <p>2. Do not send any remittance with this form. When accepted, you will be issued proper forms to be used in transmitting deposits.</p> <p>3. This election should be forwarded direct to the Retirement Division, United States Civil Service Commission, Washington 25, D. C.</p> <p>4. This form is not for use in making service credit deposits or redemptions to the retirement fund. (Application for Service Credit should be obtained for that purpose.)</p> <p>5. Deposits must be made in multiples of \$25.</p> <p>6. Total deposits may not exceed 10 percent of total basic salary, pay, or compensation, for service rendered since August 1, 1920.</p> <p>7. Your deposits, plus interest at 3 percent compounded annually, will be available at your retirement to purchase additional annuity.</p> <p>8. In the event of death or separation from the service, the total amount deposited with interest at 3 percent compounded annually will be refunded, upon receipt of application therefor.</p> <p>9. No right to the purchase of additional annuity by voluntary contributions shall exist unless the employee:</p> <p>(a) Makes redeposit of any prior refunds, and</p> <p>(b) Makes optional deposit to cover any civilian service after July 31, 1920, for which retirement deductions from salary were not made.</p>						

FORM NUMBER: SF-104

TITLE: ELECTION TO MAKE VOLUNTARY CONTRIBUTIONS

ACTUAL SIZE: 8" X 10 1/2"

PRINTED: 1 sheet, one side.

PREPARATION: By applicant in original only.

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PMA A-36

: UNITED STATES DEPARTMENT OF AGRICULTURE
: Production and Marketing Administration
: Washington 25, D. C.

: NUMBER 147 August 2, 1948

: PMA PROCEDURE TRANSMITTAL

1.9422

A2 P942

NOTICES

reserve

PERSONNEL DESIGNATIONS: Mr. William B. Crawley was designated Assistant Administrator for Production by Administrator Trigg on July 23, 1948. Mr. Crawley will also serve as Acting Director of the Agricultural Conservation Programs Branch. Mr. Crawley formerly served as Chairman of the Alabama State PMA Committee. Mr. Henry H. Whittle has been designated to serve as Acting Chairman of the Alabama State PMA Committee, effective July 28, 1948.

CHANGE OF ADDRESS: The address of Mr. Emory E. Jacobs, Administrator's Fieldman, has been changed from 408 Midwest Building, as given on Administrative Notice No. 73, to Room 213, Council Building, 100 N. W. Third Street, Oklahoma City, Oklahoma.

NEW RELEASE

101.9
7-23-48

CASES REFERRED TO THE DEPARTMENT OF JUSTICE: Delineates the activities of the Department of Justice, the Office of the Solicitor, and PMA in the handling of all cases referred by PMA to United States Attorneys and the Department of Justice. Distribution: A, B.

REVISIONS AND CHANGES

113.1
EXHIBIT A
2-13-48

ORGANIZATION OF PMA STATE OFFICES AND PMA STATE COMMITTEES: This Exhibit is revised to reflect changes in the addresses of the Kansas and Montana State PMA Offices, and changes in the listing of the following State Chairmen: Benjamin F. Vance, Philip M. Smith, Clarence W. Sheppard, Henry H. Whittle, and William B. Crawley. Distribution: A, B.

OBSOLETE

101.2
EXHIBIT A-21
10-20-46

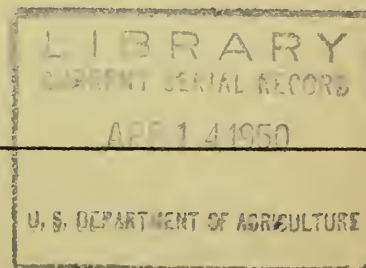
ADMINISTRATIVE AUTHORITIES - LABOR BRANCH: The Labor Branch was abolished effective March 31, 1948, by Administrative Notice 88. Remove this Exhibit from Manual. Distribution: A, B-05, 26, Field Only.

* * *

EMPLOYEE SUGGESTIONS
PAY DIVIDENDS

DISTRIBUTION: A, B.

Page 1



U. S. DEPARTMENT OF AGRICULTURE
PRODUCTION AND MARKETING ADMINISTRATION
Budget and Management Branch

CASES REFERRED TO THE DEPARTMENT OF JUSTICE

I PURPOSE

The purpose of this instruction is to delineate the activities of the Department of Justice, the Office of the Solicitor, and PMA in the handling of cases referred to United States Attorneys and the Department of Justice for appropriate action.

II DEPARTMENT OF JUSTICE

Executive Order 6166 transferred to the Department of Justice the function of deciding whether and in what manner to prosecute, or to defend, or to compromise, or to appeal, or to abandon prosecution or defense in any case referred to the Department of Justice for prosecution or defense. The United States Attorneys and the Department of Justice have full responsibility and authority for the handling of all matters involving PMA and the Department of Agriculture, once they have been referred to the Department of Justice.

III OFFICE OF THE SOLICITOR

The Solicitor is responsible for presenting the Department's case to the Attorney General and to the various United States Attorneys and, upon request, assisting the Department of Justice in the preparation and presentation of such cases at trial or upon appeal. The employees of PMA in the field should communicate with the United States Attorneys through the appropriate Regional Attorneys. The names and addresses of the Regional Attorneys are contained in PMA Instruction 120.3, "Legal Assistance on Program Matters -- Field." If special circumstances should require direct communication with a United States Attorney, the appropriate Regional Attorney of the Office of the Solicitor should be promptly informed of the communication and the information furnished.

IV PRODUCTION AND MARKETING ADMINISTRATION

It is recognized that the officials of PMA have a very real concern with the progress of cases referred to the Department of Justice. However, the effective handling of such cases both in Washington and in the field can best be assured by cooperating with, and acting in conformity with, the instructions of the Department of Justice and the United States Attorney involved. Negotiations undertaken by the officials of PMA without the knowledge or consent of the United States Attorney in charge of the matter make more difficult the continuance of satisfactory working relationships in that case and in other cases involving the Department of Agriculture.

* * *

PT- 147	DISTRIBUTION: A, B	PAGE 1 (7-23-48)
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PMA STATE CHAIRMEN

PMA 113.1
EXHIBIT A
Page 1

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Auburn, Alabama

John J. Doles
P.O. Box 8597
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Baton Rouge, Louisiana

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State College Station
Raleigh, North Carolina

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Reno, Nevada

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Hutton Building
2nd and Washington Sts.
Spokane 8, Washington

PMA 113.1
EXHIBIT A
Page 2

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U204 113.1 402U

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